## Health Agency Assignment—Sample Letter of Intent

Public Health Prevention Service

This LOI requests a PHPS Prevention Specialist (PS) for a collaborative project between the Great School of Medicine Prevention Research Center (PRC) and the Peach County Department of Health and Wellness (PCDHW), Peach County Georgia. The PS will be utilized in a project on the PRC's research agenda called Creative Solutions to Cancer Awareness and Prevention through Screening (CSCAPE) that addresses gaps in community based interventions and builds upon recommendations in the Guide to Community Preventive Services.

# A. Agency Locating Information:

Primary Supervisor: John Doe MD, MPH, PhD Secondary Supervisor: James Doe, MPH, VIP

Agency Name: Great School of Medicine Prevention Research Center

Mailing Address: 1234 West Avenue

Atlanta GA 30000

Partner Agency Name: Peach County Department of Health and Wellness

Mailing Address: 1999 East Street

Atlanta GA 30000

Phone number: 404-555-9311 Fax number: 404-555-9310 E-mail address: abc@acme.com

Partner Agency Phone: 404-555-9312 Fax number: 404-555-9310 E-mail address: xyz@acme.com

#### B. Statement of Need:

**Health problem(s) to be addressed:** Peach, the central county to the City of Atlanta, is the largest county by population in the state of Georgia at 814,000 residents, 48.1% of whom are white, 44.6% of whom are black, and 15.7% of whom live below the poverty level. Peach County has an overall breast cancer mortality rate of 30.1 per 100,000, well over that of Georgia (25.8 per 100,000) the US (26.4), and the Healthy People 2010 objective (22.3). Race-specific mortality rates reflect a major disparity: in black females in Peach County the rate is 36.1 compared to 26.3 in white females. Just under 80% (79.3%) of Georgia women 50 years and older and 75.5% of 40 years or older had a mammogram within the past two years. The percentage for 40+ meets the Healthy People 2010 recommendation.

Peach County has not reached the Healthy People 2010 objective for cervical cancer of 2.0 deaths per 100,000. The overall rate is 2.9 compared to 3.0 for Georgia and a US rate of 2.8. Black females in Georgia have a mortality rate of 4.6 per 100,000 compared to whites whose rate is too low to display—another major disparity. With 89.6% of women 18 years of age or older having a pap smear within the past three years, Georgia does not comply with the Healthy People 2010 recommendation.

**Priority population(s):** People of low socioeconomic status (SES) and African-Americans have higher incidence and mortality rates than those with higher SES for the vast majority of cancers, including (as noted above) breast and cervical cancer. Since these are precisely the populations served by the Peach County Department of Health and Wellness (PCDHW) and the Great School of Medicine Prevention Research Center (PRC) and with whom each has established close working relationships, our program will target these underserved populations.

**Key collaborations:** At the core of the activities conducted by the PS will be the collaboration between the PRC and the PCDHW to increase breast and cervical cancer screening, particularly among African-American and low SES women. The PS will work with the PRC to implement interventions recommended by the *Guide to Community* 

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*Preventive Services* and to test interventions for which there is as yet "insufficient evidence of effectiveness." Referrals for screening will be made to the PCDHW or one of its primary care community partners. The PS will collaborate with PCDHW outreach workers on interventions such as a small media campaign, which is recommended by the *Community Guide* for breast cancer screening; more research is needed on this approach for cervical cancer screening.

## C. Assignment Description:

## Major activities and the Performance Requirements each activity addresses

- 1) Plan and implement a small media campaign highlighting the Centers for Disease Control's National Breast and Cervical Cancer Screening Program aimed at underserved populations in Peach County, Georgia. Coordinate a collaborative process between the PRC and the PCDHW to develop and disseminate the media (brochures, flyers, newsletters, etc) and promote screening opportunities at the PCDHW or with one of its primary care partners (PR 8, 11, 10). *Level of responsibility:* Planner, media developer, coordinator, analyst, team member, facilitator. *End products:* A) A plan for conducting a small media campaign to promote breast and cervical cancer screening. B) Culturally appropriate small media (flyers, brochures, newsletters or videos) C) Monthly reports containing details of progress for each stage of the plan to include media developed and the process for dissemination and tracking of resources.
- 2) Evaluation of activities conducted by the collaboration between PRC and PCDHW; Collect, track, and analyze data necessary to determine effectiveness of the program's activities based on goals and objectives; recommend appropriate actions (PR 1, 9). *Level of responsibility:* Coordinator, analyst, team member. *End products:* Monthly progress reports (scheduled and ad hoc) addressing appropriate performance measures.

#### D. Organizational Structure and Supervision:

**Organizational location:** The PS will be housed at the PRC.

**Developmental and training opportunities:** The PS will be provided with all necessary administrative and technical support appropriate to conduct activities described. This support will include opportunities to attend training and/or meetings at the national, state, and local level sponsored by PCDHW or Great and by both public health organizations (e.g. NACCHO) and academic organizations (e.g. ATPM).

**Organizational commitment and work place support:** Both the PRC and the PCDHW are committed to the collaborative process, with each other and outside agencies. The presence of a PS at the nexus of a partnership between local applied public health (PCDHW) and an academic public health partner (PRC) will infuse a valuable perspective. It is exemplary of the type of collaboration to which each is committed. In addition to the resources committed to conduct the project, the PS will have access to senior staff and faculty. The desktop computer for the PS will meet or exceed CDC's standards.

**Primary supervisor:** John Doe, MD, MPH, PhD. Dr. Doe is the Director of the PRC's Cancer Prevention and Control Research Network, funded by a PRC Special Interest Project. He is an Associate Professor in the Department of Community Health and Preventive Medicine and a well-published cancer epidemiologist. He was formerly a CDC research scientist.

**Secondary supervisor**: James Doe, MPH, VIP. Mr. Doe is the Director of the Division of Population Health at the Peach County Department of Health and Wellness. He has worked as an epidemiologist in both the private and public sector. Before coming to Peach County, he managed CDC funded epidemiological studies for the Emory University School of Medicine.